

RURAL HCAP ISSUES

Panhandle Partnership for Health and Human Services

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PANHANDLE PARTNERSHIP FOR HEALTH AND HUMAN SERVICES

- Nebraska's Panhandle
- Frontier area, 11 counties
- 90,410 people

PROJECT DELIVERABLES

- Integrated Internet based MIS and Performance Improvement MIS
- New and Improved Mental Health System of Care
- Newly established Public Health District and Public Health Plan

CULTURAL CHANGES

- Building of collaborative will-Agencies working together and sharing resources with one another
- Developing systems based on Continuums of Care
- Considerations for geographic disparity

BEST PRACTICES MODELS

- Ways to Organize
 - 1) Collaboratives working together-RCHN, PPHHS, PPHD
 - a) Links health care, public health, elected officials into one integrated planning/delivery process
 - 2) Bottom Up
 - 3) Better than tokenism
- Children's Outreach Project
 - 1) Building on local resources
 - 2) Recognized as model for HP 2010 Rural Projects
- Panhandle Public Health District
- Impact on State Legislation

CHALLENGES WE FACE

- Shortage of Health and IT Professionals
- Planning systems rather than isolated pieces
 - 1) True for systems of care as well as technology
- Geographic Distances
- Limited Population
- Funding and reimbursement policies that do not reflect the rural need

SUSTAINABILITY-RURAL MODELS THAT WORK

MENTAL HEALTH SERVICES LOCAL CRISIS RESPONSE TEAMS

- Licensed mental health professionals, RNs, law enforcement, ER staff
- 24/7
- Assessment, crisis intervention, to determine appropriate level of care
- Use local resources in client's home community
- Extensive ongoing training for responders

SUCCESS OF LOCAL CRISIS RESPONSE TEAMS

- Cost savings to counties \$66,300, State \$374,000
- 204 people served
- Recidivism rate 8%
- Decrease in number of Emergency Protective Cases
- Better system of care for the people we serve

MENTAL HEALTH MEDICATION MANAGEMENT CLINIC

- Average of 35 people served daily, 2600 people enrolled, 1040 walk-ins
 - 1) 4000 medication management contacts
 - 2) 80 monthly (960 annual) referrals to other human services
 - 3) 40 monthly (480 annual) referrals to medical care
- Annual Cost Savings \$128,000

CHALLENGES

- Keeping teams established in each of the areas
- Getting MD's and PA's to attend trainings